



State of California—Health and Human Services Agency
Department of Health Care Services



EDMUND G. BROWN JR.
GOVERNOR

January 15, 2013

Mr. José U. Esparza, CFO
Altamed Health Services Corporation
2040 Camfield Ave.
Los Angeles, CA 90040-1502

PROVIDER NO (NPI): 1124252069, 1356515506, 1174719181, 1134398043,
1619101565, 1346414513, 1346414612, 1679789051,
1407061930, 1205041746, 1790999373, 1477737385

FISCAL PERIOD ENDED: APRIL 30, 2011

The Federally Qualified Health Center (FQHC) Reconciliation Request has been received and accepted for processing. The receipt date of November 4, 2011 establishes the beginning of the 36-month review limitation period in accordance with Section 14170 of the Welfare and Institutions Code.

The reported Medi-Cal settlement due in the amount of \$0 for the above fiscal period will be accepted as filed.

If you have any questions, please contact Tony Tran, at (916) 650-6986.

Sincerely,

Original Signed By

Ralph R. Zavala, Supervisor
Audit Review and Analysis Section
Financial Audits Branch